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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION

REQUEST FOR ALLOWABLE AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-105
Effective 1-1-65

B.K.

Temporary C-104 to allow test of well down pipeline to minimize waste

I. Operator
Cotton Petroleum Corporation

Address
717-17th Street, Suite 2200, Denver, Colorado 80202

Reason(s) for filing (Check proper box)
 New Well Change in Transporter of Oil
 Recompletion Oil Dry Gas
 Change in Ownership Casinghead Gas Condensate expires 8-26-80

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Apache	Well No. 126	Pool Name, including Formation Lindrith Gallup Dakota West	Kind of Lease State, Federal or Fee Jicarilla Indian	Lease No. 127
Location Unit Letter <u>P</u> ; <u>480</u> Feet From The <u>East</u> Line and <u>970'</u> Feet From The <u>South</u>				
Line of Section <u>10</u> Township <u>24N</u> Range <u>4W</u> , NMPM, Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Basin, Inc.	Address (Give address to which approved copy of this form is to be sent) 511 West Ohio Street, Midland, Texas 78701
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 990, New Mexico 87401
If well produces oil or liquids, give location of tanks. Unit <u>P</u> Sec. <u>10</u> Twp. <u>24N</u> Rge. <u>4W</u>	Is gas actually connected? <u>No</u> When

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

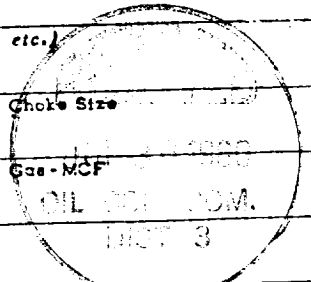
Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 7-2-80	Date Compl. Ready to Prod. 7-24-80	Total Depth 7462'	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.) 6809'	Name of Producing Formation Gallup-Dakota	Top Oil/Gas Pay	Tubing Depth					
Perforations	Depth Casing Shoe 7462'							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8 5/8"	350'	300 sxs to surface
7 7/8"	4 1/2"	7462'	600 sxs DV @ 4051' KB
		Stage 1	700 sxs
		Stage 2	

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of lead oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks A test allowable of 2000 BO is requested	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.



GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

D.E. Wood / HGS
(Signature)

Division Production Manager
(Title)

7-25-80
(Date)

OIL CONSERVATION COMMISSION

APPROVED AUG 6 1980, 19

BY Original Signed by FRANK T. CHAVEZ

TITLE SUPERVISOR DISTRICT #3

This form is to be filed in compliance with RULE 1104.
 If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the devils tests taken on the well in accordance with RULE 111.
 All sections of this form must be filled out completely for a well on new and recompleted wells.
 Fill out only Sections I, II, III, and VI for changes of well name or number, or transporter, or other such change of conditions.